

Kentucky Behavioral Telehealth Network (KBTN) HCP 17229
Monday, September 30, 2015 FCC Docket Number 02-60
Kentucky River Community Care, Inc. Quarterly Data Report Requirements
APPENDIX D – Pages 73-75 of Federal Communications
Commission FCC 07-198

1. Project Contact and Coordination Information

a. Identify the project leader(s) and respective business affiliations.

Ernestine Weems
Kentucky River Community Care, Inc.
178 Community Way
PO Box 794
Jackson, KY 41339
Phone: 606-666-9006
Fax: 606-666-5487
ernie.weems@ccdminc.org

Debbie Lickliter, Project Assistant Coordinator
Kentucky River Community Care, Inc.
115 Rockwood Lane Hazard, KY 41701
Phone: 606-436-5761
Fax: 606-436-5797
debbie.lickliter@krccnet.com

b. Provide a complete address for postal delivery and the telephone, fax, and e-mail address for the responsible administrative official.

Ernestine Weems
Kentucky River Community Care, Inc.
178 Community Way
PO Box 794 Jackson, KY 41339
Phone: 606-666-9006
Fax: 606-666-5487
ernie.weems@ccdminc.org

c. Identify the organization that is legally and financially responsible for the conduct of activities supported by the award.

Kentucky River Community Care, Inc.
178 Community Way
PO Box 794
Jackson, KY 41339
Phone: 606-666-9006
Fax: 606-666-5840

d. Explain how project is being coordinated throughout the state or region.

Kentucky River Community Care, Inc., the lead agency in the Kentucky Behavioral Telehealth Network (KBTN) has designated the above named staff to coordinate the KBTN project. The Kentucky agencies that are a part of the KBTN receive email updates and hold group meetings to discuss changes or news in the KBTN as needed to make decisions, discuss changes and share news on the KBTN project.

During the past quarter communications have included emails and telephone calls providing specific information regarding sites and addresses.

We continue to contact network participants to discuss their participation with the Kentucky Behavioral Telehealth Network. However, due to long delays in connectivity, new participants are requiring six month operation protocol. After, the system has been utilized successfully KRCC will again reach out to potential participants.

Six (6) KBTN partners are confirmed in the network with 22 planned connected sites. One partner has submitted their official notification of their wish to withdraw from the network.

Our goal continues to be to increase access to traditional primary and specialty medical model health services for the people we serve, not to replace the psychosocial rehabilitation model prevalent within most community mental health centers with just a medical model.

Persons with mental illness benefit from psychosocial rehabilitation and integrated dual diagnosis treatment as well as traditional medical primary and specialty care. When access to medical care is made difficult for a particular type of psychosocial rehabilitation clinic because of distance, lack of providers or immediate access to medical information recovery and rehabilitation suffers.

2. Identify all health care facilities included in the network.

- a. Provide address (including county), zip code, Rural Urban Commuting Area (RUCA) code (including primary and secondary), six-digit census tract, and phone number for each health care facility participating in the network.
- b. For each participating institution, indicate whether it is:
 - i. Public or non-public;
 - ii. Not-for-profit or for-profit;
 - iii. An eligible health care provider or ineligible health-care provider with an explanation of why the health care facility is eligible under section 254 of the 1996 Act and the Commission's rules or a description of the type of ineligible health care provider entity.

Following is a listing of the health care facilities and community mental health centers identified as participants for the KBTN network. As of today these health care facilities are scheduled participating partners in the KBTN Network: Kentucky River Community Care, Inc., Pathways, Inc., Lifeskills, Inc., Mountain Comprehensive Care Center, Inc., River Valley Behavioral Health and Four River Behavioral Health.

KBTN has received and completed 466-A packages for 6 partners.

<i>Facility Name</i>	<i>Address/Zip Code</i>	<i>County</i>	<i>RUCA</i>	<i>Census Tract</i>	<i>Phone Number</i>	<i>Public or Non Public</i>	<i>Profit status</i>	<i>Eligible or ineligible provider</i>
Kentucky River Community Care, Inc.	PO Box 794 Jackson KY 41339	Breathitt	10	980300	606-666-9006	non-public	not for profit	Eligible, Kentucky licensed community mental health agency
Appalachian Regional Healthcare	102 Medical Center Drive Hazard KY 41701	Perry	7	970500	606-439-6713	non public	not for profit	Eligible, JCAHO accredited hospital
River Valley Behavior Health	PO Box 1637 Owensboro KY 42302-1637	Daviess	1	000500	270-689-6500	non public	not for profit	Eligible, Kentucky licensed community mental health agency
Lifeskills, Inc.	PO Box 6499 Bowling Green KY 42102-6499	Warren	4	010100	270-901-5000	non public	not for profit	Eligible, Kentucky licensed community mental health agency
Pathways, Inc.	PO Box 790 Ashland KY 41101	Boyd	1	030300	606-329-8588	non public	not for profit	Eligible, Kentucky licensed community mental health agency
Mountain Comprehensive Care Center	150 South Front Avenue Prestonsburg KY 41653	Floyd	10	980200	606-886-8572	non public	not for profit	Eligible, Kentucky licensed community mental health agency
Four Rivers Behavior Health	425 Broadway Suite 201 Paducah KY 42001	McCracken	4	030300	270-442-1452	non public	not for profit	Eligible, Kentucky licensed community mental health agency

3. Network Narrative: In the first quarterly report following the completion of the competitive bidding process and the selection of vendors, the selected participant must submit an updated technical description of the communications network that it intends to implement, which takes into account the results its network design studies and negotiations with its vendors. This technical description should provide, where applicable:

- a. Brief description of the backbone network of the dedicated health care network, e.g., MPLS network, carrier-provided VPN, a SONET ring;

With the completion of the competitive bidding process KBTN selected Windstream Communications, Inc. as the vendor. Windstream operates the Kentucky Public Education Network (KPEN) which is an MPLS network. The Windstream approach in deploying MPLS networks is to do one site at a time, starting with the Host site. The disaster recovery site was completed second. Windstream requires a Site Survey form before initiating orders. Information will include the Site Name (critical for future reference regarding possible repair issues), customer contact, and telephone number. Other critical information requires IP addressing for each site, customer must provide their sub-nets to be routed on the network and gateway addresses for the CE and PE Routers. KRCC has completed the gateway IP addressing scheme. Once each office has been established on the MPLS network, Windstream will do a test and turn-up for that site with our DSTAC group. Only after DSTAC has accepted the order will the Project Coordinator establish a conference bridge that will involve someone with KRCC or the local site coordinator and our DSTAC, at this point the office will be "live" and the order passed once it has been accepted by the designated representative.

The KPEN network is supported by a 10Gig Core with diversity and redundancy. The 10-Gig core nodes are located in Lexington, Louisville, London, and Elizabethtown. A network drawing is attached. The Windstream MPLS network provides security thru cloud-based FortiGate Firewall systems. Reliability on the network is provisioned over diverse fiber facilities and hardware redundancy. KBTN will be provided access to CROS (Cisco Remote Operations Service). This web portal provides KBTN the following: Network Availability, Ticket Management, Network Performance, Requests for Change, Configuration Management Database, Company and Account Information. Windstream is already a major provider of MPLS services on the KIH2 contract serving approximately 520 state agency offices as a subcontractor to AT&T. Video services from CVC already traverses the Windstream MPLS network.

- b. Explanation of how health care provider sites will connect to (or access) the network, including the access technologies/services and transmission speeds;

Partners will be connected together via the KBTN MPLS network. The sites will have video conference interconnectivity thru the conference bridge. Partners will access the network with minimum speed of 1.5 mg up to 45 mg at the host site.

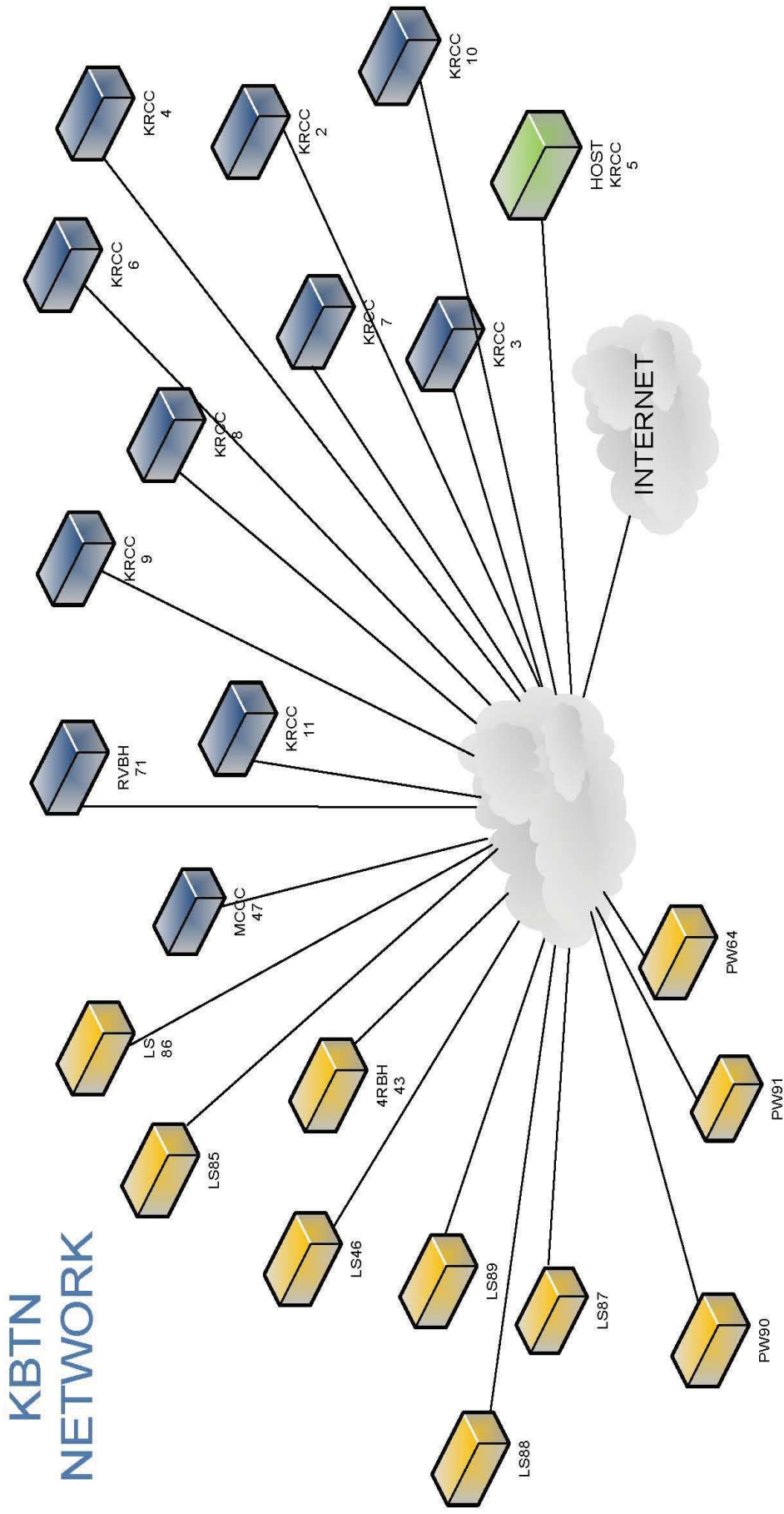
4. List of Connected Health Care Providers: Provide information below for all eligible and non-eligible health care provider sites that, as of the close of the most recent reporting period, are connected to the network and operational.

- a. Health care provider site:
- b. Eligible provider (yes/No):
- c. Type of network connection (e.g., fiber, copper, wireless);
- d. How connection is provided (e.g., carrier-provided service; self-constructed; leased facility);
- e. Service and/or speed of connection (e.g., DS1, DS3, DSL, OC#, Metro Ethernet (10 Mbps);
- f. Gateway to NLR, Internet2, or the Public Internet (yes/No); Federal Communications Commission FCC 07-19874
- g. Site Equipment (e.g., router, switch, SONET SDM, WDM), including manufacturer name and model number.
- h. Provide a logical diagram or map of the network.

Please see the following in the following table and network diagram:

<i>Facility Name</i>	<i>Connected ? Yes/No</i>	<i>Type of Network (i.e. fiber, copper, wireless)</i>	<i>How connection provided (i.e. carrier, self-constructed, leased)</i>	<i>Service Speed</i>	<i>Gateway to NLR, Internet2, Public Internet? Yes/No</i>	<i>Site Equipment</i>	<i>Logical Diagram or Map of Network</i>
KRCC 5 - Breathitt	Yes	Fiber	Leased	45	Yes	Layer 3 Switch Installed	See Attached Network Diagram
KRCC 2 - Caney	Yes	Copper	Carrier	1.5	No	None	
KRCC 3 - Owsley TR	Yes	Copper	Carrier	1.5	Yes	None	
KRCC 4 - Letcher ADTC	Yes	Copper	Carrier	1.5	No	None	
KRCC 6 - Knott	Yes	Copper	Carrier	1.5	No	None	
KRCC 7 - Lee	Yes	Copper	Carrier	1.5	No	None	
KRCC 8 - Leslie	Yes	Copper	Carrier	1.5	No	None	
KRCC 9 - Letcher OP	Yes	Copper	Carrier	1.5	No	None	
KRCC 10 - Perry OP	Yes	Fiber	Leased	45	Yes	Layer 3 Switch Installed	
KRCC 11 - Wolfe OP	Yes	Copper	Carrier	1.5	No	None	

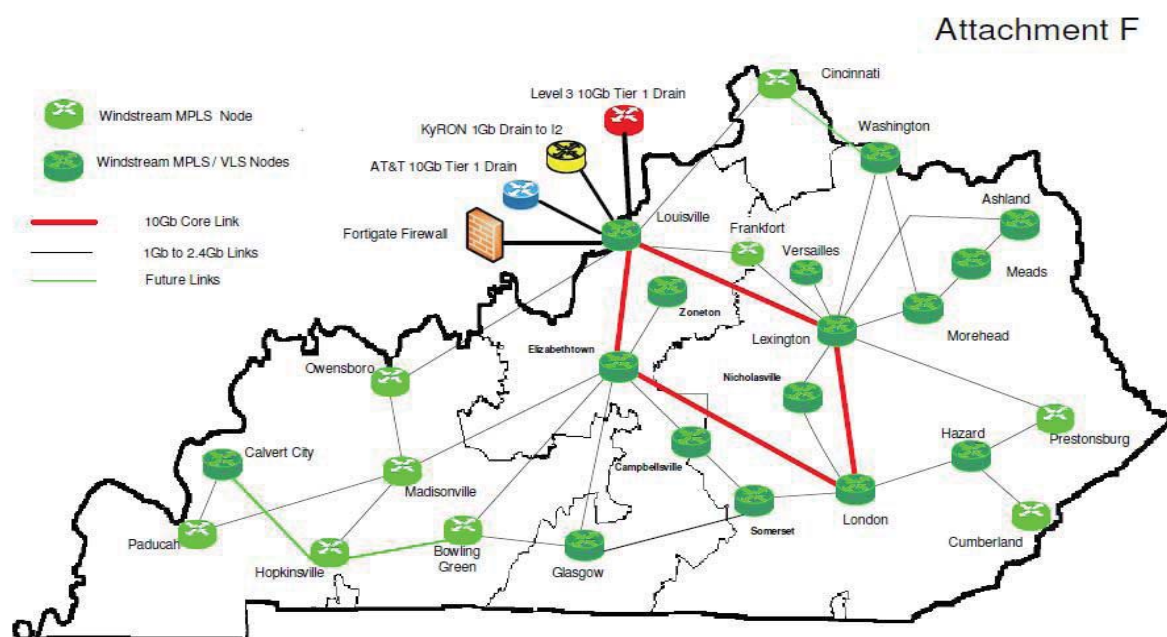
<i>Facility Name</i>	<i>Connected ? Yes/No</i>	<i>Type of Network (i.e. fiber, copper, wireless)</i>	<i>How connection provided (i.e. carrier, self-constructed, leased)</i>	<i>Service Speed</i>	<i>Gateway to NLR, Internet2, Public Internet? Yes/No</i>	<i>Site Equipment</i>	<i>Logical Diagram or Map of Network</i>
MCCC 47 - Floyd	Yes	Copper	Carrier	1.5	Yes	None	
RVBH 71 - Cigar Factory	Yes	Fiber	Leased	10	Yes	None	
4RBH 43 - Paducah	Yes	Fiber	Leased	10	Yes	None	
LS 46 - Lifeskills	Yes	Fiber	Leased	45	Yes	None	
LS 85 - Allen	Yes	Copper	Carrier	3	Yes	None	
LS 86 - Barren	Yes	Copper	Carrier	3	Yes	None	
LS 87 - Edmonson	Yes	Copper	Carrier	3	Yes	None	
LS 88 - Metcalfe	Yes	Copper	Carrier	3	Yes	None	
LS 89 - Monroe	Yes	Copper	Carrier	3	Yes	None	
PW 64 - Boyd	Yes	Fiber	Leased	45	Yes	None	
PW 90 - Montgomery	Yes	Copper	Carrier	10	Yes	None	
PW 91 - Greenup	Yes	Copper	Carrier	10	Yes	None	



KRCC – Kentucky River Community Care, Inc. (10)
 RVBH – River Valley Behavioral Health (1)
 PW – Pathways, Inc. (3)

MCCC – Mountain Comprehensive Care Center (1)
 4RBH – Four Rivers Behavioral Health (1)
 LS – Lifeskills, Inc. (6)

Access to the internet on KPEN is done via the Host MPLS Circuit. The attached network drawing identifies how this is done using VLANs from the Windstream provided Ethernet switch. Windstream's proposed network configuration includes internet access via the Host site in Jackson plus the disaster recovery site in Hazard. Windstream is a Tier 2 provider of Internet services with separate and diverse 10Gig internet feeds going to AT&T and Level 3. The network feeds are configured based on load-balancing and also fail-over in case one of the internet feeds fail.



c. Explanation of how and where the network will connect to a national backbone such as NLR or Internet2;

Windstream is permitting KPEN services to KBTN. As part of the contract with KPEN, the network is constantly monitored; any link that exceeds 50% utilization must be upgraded in order to accommodate total diversity for all traffic to fail-over. The KPEN network is also linked to another higher education network referred to as KRON (Kentucky Regional Optical Network). This high speed fiber based DWDM platform provides direct 10Gig connectivity to selected universities. Windstream is the provider of KRON. It is the KRON network that provides the highway to allow access to Internet 2 (I2). For access to I2 services KRCC must secure approval from the Council for Postsecondary Education (CPE). Windstream can provide both administrative and technical assistance to KRCC in meetings with CPE officials to discuss I2 access.

d. Number of miles of fiber construction, and whether the fiber is buried or aerial;

Windstream has evaluated each site by researching that location using Google and CARRIE, an industry standard telecommunications web portal to identify sites and the local carriers via the serving NPA/NXX for that site. Windstream can provide services to all sites listed on the 465 attachment. The installation of buried or aerial fiber is the responsibility of the local carrier and the pricing for this is included in the installation charges. Unless the connection is 10 Mb or larger fiber is not required.

e. Special systems or services for network management or maintenance (if applicable) and where such systems reside or are based.

KBTN will be provided access to CROS (Cisco Remote Operations Service). This web portal provides KBTN the following: Network Availability, Ticket Management, Network Performance, Requests for Change, Configuration Management Database, Company and Account Information.

5. Identify the following non-recurring and recurring costs, where applicable shown both as budgeted and actually incurred for the applicable quarter and funding year to-date.

The KBTN Network has faced several geographical barriers. Windstream has encountered issues with fiber builds primarily in the western end of the state. All the sites were originally projected to be complete and connected early in 2013. However, as of August 30th 2014 all KBTN site fiber builds are complete, however all connectivity issues have not been resolved including but limited to, appropriate internet speeds and final line testing.

The upgraded Polycom servers have been installed and are currently being tested. KRCC had to purchase a firewall to accommodate the KBTN network outward/inward dialing interface for video conferencing. KRCC will also have to create a DNS server to create dialing onto the KBTN video network for locations outside KBTN partners.

- a. Network Design;
- b. Network Equipment, including engineering and installation;
- c. Infrastructure Deployment/Outside Plant;
 - i. Engineering;
 - ii. Construction;
- d. Internet2, NLR, or Public Internet Connection
- e. Leased Facilities or Tariffed Services;
- f. Network Management, Maintenance, and Operation Costs (not captured elsewhere);
- g. Other Non-Recurring and Recurring Costs

KBTN Pricing List

Bandwidth	Monthly Network Port	KBTN Monthly	Monthly Local Loop	KBTN Monthly	Monthly TOTAL	KBTN Total Monthly	Installation	KBTN Installation
1.5Mbps	\$426.60	\$63.99	\$400.00	\$60.00	\$874.00	\$123.99	\$500.00	\$75.00
3Mbps	\$853.20	\$127.98	\$800.00	\$120.00	\$1,748.00	\$247.98	\$1,000.00	\$150.00
4.5Mbps	\$1,279.80	\$191.97	\$1,200.00	\$180.00	\$2,622.00	\$371.97	\$1,500.00	\$225.00
6Mbps	\$1,706.40	\$255.96	\$1,600.00	\$240.00	\$3,496.00	\$495.96	\$2,000.00	\$300.00
10Mbps	\$849.00	\$127.35	\$2,600.00	\$390.00	\$3,544.00	\$517.35	\$500.00	\$75.00
25Mbps	\$1,029.60	\$154.44	\$2,600.00	\$390.00	\$3,744.00	\$544.44	\$500.00	\$75.00
45Mbps	\$1,209.60	\$181.44	\$2,600.00	\$390.00	\$3,944.00	\$571.44	\$500.00	\$75.00
65Mbps	\$1,389.60	\$208.44	\$3,500.00	\$525.00	\$5,044.00	\$733.44	\$500.00	\$75.00
100Mbps	\$1,479.60	\$221.94	\$3,500.00	\$525.00	\$5,144.00	\$746.94	\$500.00	\$75.00
155Mbps	\$1,749.60	\$262.44	\$3,500.00	\$525.00	\$5,444.00	\$787.44	\$500.00	\$75.00
622Mbps	\$2,109.60	\$316.44	\$3,500.00	\$525.00	\$5,844.00	\$841.44	\$500.00	\$75.00
GigE	\$3,009.60	\$451.44	\$3,500.00	\$525.00	\$6,844.00	\$976.44	\$500.00	\$75.00

Other KPEN Services and Monthly Rates

Item	Monthly Rate	KBTN	Installation	KBTN Installation
Internet - per Mb	\$6.00	\$0.90	\$250.00	\$37.50
QoS per Site	\$50.00	\$7.50	\$500.00	\$75.00
Additional VPN	\$149.00	\$22.35	\$500.00	\$75.00

KPEN Change Request Standard	\$250.00	\$37.50
KPEN Change Request Expedite	\$500.00	\$75.00

Prices in gray are for KBTN eligible participants only

6. Describe how costs have been apportioned and the sources of the funds to pay them:

Kentucky Behavioral Telehealth Network

Site Name	County	Bandwidth	Monthly Circuit Cost	Annual Cost Network Circuit	Internet @ \$6 per Mb	QOS	Taxes Fees @ 20%	Annual Total	One Time Expenses & Installation	Project Total	FCC Portion 85%	KBTN Commitment 15%	KIH t1 plus taxes & fees	Savings
Kentucky River Community Care Inc Caney Creek Center	Knott	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Kentucky River Community Care Inc Owsley TR	Owsley	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Kentucky River Community Care Inc Letcher TR/ADTC	Letcher	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Kentucky River Community Care Inc Breathitt County Outpatient	Breathitt	45	\$3,530	\$42,360	396	797.8	\$8,472.0	\$52,026	\$8,080	164141.92	\$139,521	\$24,621	\$16,560	(\$8,061)
Kentucky River Community Care Inc Knott County Outpatient	Knott	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Kentucky River Community Care Inc Lee County Outpatient	Lee	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Kentucky River Community Care Inc Leslie County Outpatient	Leslie	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Kentucky River Community Care Inc Letcher County Outpatient	Letcher	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Kentucky River Community Care Inc Perry County Outpatient	Perry	45	\$3,944	\$47,328	1080	600	\$9,465.6	\$58,474	\$8,790	184210.64	\$156,579	\$27,632	\$16,560	(\$11,072)
Kentucky River Community Care Inc Wolfe County Outpatient	Wolfe	1.5	\$874	\$10,488	0	600	\$2,097.6	\$13,186	\$2,789	42345.47	\$35,994	\$6,352	\$16,560	\$10,208
Appalachian Regional Healthcare Psychiatric Center	Perry	0		\$0	0	0	\$0.0	\$0		\$0	\$0	\$0		\$0
Appalachian Regional Healthcare Medical Center	Perry	0		\$0	0	0	\$0.0	\$0		\$0	\$0	\$0		\$0
Four Rivers Behavioral Health	McCracken	10	\$3,544	\$42,528	216	600	\$8,505.6	\$51,850	\$3,039	158587.47	\$134,799	\$23,788	\$16,560	(\$7,228)
Lifeskills, Inc.	Warren	45	\$3,944	\$47,328	2160	600	\$9,465.6	\$59,554	\$3,039	181699.47	\$154,445	\$27,255	\$16,560	(\$10,695)
Mountain Comprehensive Care Center Johnson County Outpatient	Johnson	1.5	\$874	\$10,488	216	600	\$2,097.6	\$13,402	\$2,789	42993.47	\$36,544	\$6,449	\$16,560	\$10,111
Pathways, Inc. Boyd Co. Outpatient Clinic	Boyd	45	\$3,944	\$47,328	3240	600	\$9,465.6	\$60,634	\$3,039	184939.47	\$157,199	\$27,741	\$16,560	(\$11,181)
River Valley Behavioral Health Cigar Factory Complex	Daviess	10	\$3,544	\$42,528	216	600	\$8,505.6	\$51,850	\$2,789	158337.47	\$134,587	\$23,751	\$16,560	(\$7,191)
Lifeskills, Inc. Allen county Service Center	Allen	3	\$1,748	\$20,976	216	600	\$4,195.2	\$25,987	\$3,539	81500.27	\$69,275	\$12,225	\$16,560	\$4,335

Kentucky Behavioral Telehealth Network

Site Name	County	Bandwidth	Monthly Circuit Cost	Annual Cost Network Circuit	Internet @ \$6 per Mb	QOS	Taxes Fees @ 20%	Annual Total	One Time Expenses & Installation	Project Total	FCC Portion 85%	KBTN Commitment 15%	KIH tl plus taxes & fees	Savings
Lifeskills, Inc. Barren County Service Center	Barren	3	\$1,748	\$20,976	216	600	\$4,195.2	\$25,987	\$3,539	81500.27	\$69,275	\$12,225	\$16,560	\$4,335
Lifeskills, Inc. Edmonson County Service Center	Edmonson	3	\$1,748	\$20,976	216	600	\$4,195.2	\$25,987	\$3,539	81500.27	\$69,275	\$12,225	\$16,560	\$4,335
Lifeskills, Inc. Metcalfe County Service Center	Metcalfe	3	\$1,748	\$20,976	216	600	\$4,195.2	\$25,987	\$3,539	81500.27	\$69,275	\$12,225	\$16,560	\$4,335
Lifeskills, Inc. Monroe County Service Center	Monroe	3	\$1,748	\$20,976	216	600	\$4,195.2	\$25,987	\$3,539	81500.27	\$69,275	\$12,225	\$16,560	\$4,335
Pathways, Inc. Montgomery County Outpatient	Montgomery	10	\$3,544	\$42,528	720	600	\$8,505.6	\$52,354	\$3,039	160099.47	\$136,085	\$24,015	\$16,560	(\$7,455)
Pathways, Inc. Greenup Co. Outpatient Clinic	Greenup	10	\$3,544	\$42,528	720	600	\$8,505.6	\$52,354	\$3,039	160099.47	\$136,085	\$24,015	\$16,560	(\$7,455)

- a. Explain how costs are identified, allocated among, and apportioned to both eligible and ineligible network participants.

Please see spreadsheet above.

- b. Describe the source of funds from:
 - i. Eligible Pilot Program network participants
Local funds
 - ii. Ineligible Pilot Program network participants
Local funds

- c. Show contributions from all other sources (e.g., local, state, and federal sources, and other grants).

None at this time

- i. Identify source of financial support and anticipated revenues that is paying for costs not covered by the fund and by Pilot Program participants.

Medicaid, Medicare, self-pay and private insurance

- ii. Identify the respective amounts and remaining time for such assistance.
Please see above spreadsheet.

- d. Explain how the selected participant's minimum 15 percent contribution is helping to achieve both the selected participant's identified goals and objectives and the overarching goals of the Pilot Program

Unknown at this time

7. Identify any technical or non-technical requirements or procedures necessary for ineligible entities to connect to the participant's network. Any issue that has impacted upon ineligible entities. No technical requirements to report this quarter.

8. Provide an update on the project management plan, detailing:

- a. The project's current leadership and management structure and any changes to the management structure since the last data report; and

No changes to report this period

- b. In the first quarterly report, the selected applicant should provide a detailed project plan and schedule. The schedule must provide a list of key project

- c. Deliverables or tasks, and their anticipated completion dates. Among the deliverables, participants must indicate the dates when each health care provider site is expected to be connected to the network and operational. Subsequent quarterly reports should identify which project deliverables, scheduled for the previous quarter, were met, and which were not met. In the event a project deliverable is not achieved, or the work and deliverable

Project Timeline as of December, 2013

Site Name	County	Bandwidth	Expected Installation	Installation Year
Kentucky River Community Care Inc. Caney Creek Center	Knott	1.5	Fall	Complete
Kentucky River Community Care Inc. Owsley TR	Owsley	1.5	Fall	Complete
Kentucky River Community Care Inc. Letcher TR/ADTC	Letcher	1.5	Fall	Complete
Kentucky River Community Care Inc. Breathitt County Outpatient	Breathitt	45	Fall	Complete
Kentucky River Community Care Inc. Knott County Outpatient	Knott	1.5	Fall	Complete
Kentucky River Community Care Inc. Lee County Outpatient	Lee	1.5	Fall	Complete
Kentucky River Community Care Inc. Leslie County Outpatient	Leslie	1.5	Fall	Complete
Kentucky River Community Care Inc. Letcher County Outpatient	Letcher	1.5	Fall	Complete
Kentucky River Community Care Inc. Perry County Outpatient	Perry	45	Fall	Complete
Kentucky River Community Care Inc. Wolfe County Outpatient	Wolfe	1.5	Fall	Complete

Site Name	County	Bandwidth	Expected Installation	Installation Year
Appalachian Regional Healthcare Psychiatric Center	Perry	0	Summer	Completed
Appalachian Regional Healthcare Medical Center	Perry	0	Summer	Completed
Four Rivers Behavioral Health	McCracken	10	Spring	Completed
Lifeskills, Inc.	Warren	45	Fall	Completed
Lifeskills, Inc.	Allen	3	Fall	Completed
Lifeskills, Inc.	Barren	3	Fall	Completed
Lifeskills, Inc.	Edmonson	3	Fall	Completed
Lifeskills, Inc.	Metcalf	3	Fall	Completed
Lifeskills, Inc.	Monroe	3	Fall	Completed
Mountain Comprehensive Care Center Johnson County Outpatient	Johnson	1.5	Spring	Completed
Pathways, Inc. Boyd Co. Outpatient Clinic	Boyd	45	Spring	Completed
Pathways, Inc. Greenup Co. Outpatient Clinic	Greenup	10	Fall	Completed
River Valley Behavioral Health Cigar Factory Complex	Daviess	10	Spring	Completed

9. Provide detail on whether network is or will become self-sustaining. Selected participants should provide an explanation of how network is self-sustaining.

Kentucky is fortunate because there is currently legal support for Telehealth and eHealth in Kentucky Law. LCSW's and CSW's received eligibility confirmation this year to provide services via TeleHealth. Kentucky is also expected to authorize Substance Abuse Services via TeleHealth in the very near future.

The providers in the KBTN network are by and large behavioral health providers. Since we are still in the network implementation stage, we do not yet have firm cost projections of the likely costs or the possible needed off-setting service revenue necessary to sustain the network.

Community Mental Health Centers in Kentucky were in a closed network until January of this year when the State of Kentucky implemented Any Willing Provider'. Therefore not only were there three new Medicaid Managed Care contracts to negotiate and implement this year, but Community Mental Health Centers now would be competing with private providers.

Managed Care continues to be a primary focus with new contracts being developed by the Managed Care entities. However, once in place, the Managed Care initiative should include rates for eHealth services that should assist in sustaining the state wide KBTN model. Currently KRCC has two payers paying for TeleHealth facility rates.

Another avenue for sustain options include a Kentucky eHealth board and a Kentucky Health Information Exchange (KHIE) as a model for developing the interchange of health information among providers, hospitals and payers. The KHIE will be designing the software for translation between health care provider information systems electronic health records to facilitate access to health information. These activities are led by the former Kentucky Lt. Governor Dan Mongiardo, MD, who as a physician and surgeon has a strong interest in Telehealth and eHealth. The KBTN sustain resources could come from the specialized health information funding being developed on both state and federal levels. Many of the Community Mental Health Centers are working diligently to access KHIE. Funds are available to assist centers with this connectivity. KRCC hopes to have their connectivity complete by 2015.

If all else fails, we plan to seek support from the FCC's current rural health care program and the partial subsidy provided under that program once the RHC-PP resources are lapsed. Based upon our current participation in that rural program we expect significant savings will accrue to help offset the higher costs of Telehealth broadband requirement. Our expectation is that with starting the drawdown of FCC funds in 2012, we expect that we will have a 3-5 year program that would take us into 2016 before we would need to sustain funding.

Another significant roadblock at this time is the funding for the installation of the end user equipment and switches we need for multipoint connectivity and instant point to point connectivity. KRCC received a USDA grant. The vendor for the MCU was selected in June, 2012 documentation was submitted to authorize the purchase of the equipment and the equipment has been received and installation was complete in January 2014. Other end user equipment will be the responsibility of each participant.

Minimum 15% Funding Match. Each KBTN site will be billed for its share of the sites in the network. These matching funds will come from general revenue of the health care provider. Insurance revenue for the Telehealth services would include overhead expenses such as telecommunications costs.

KBTN partners expect revenue will increase because of the Kentucky statutes allowing for billing of Telehealth services. Furthermore, because of the ability to receive continuing education credits via the Telehealth network, providers will pay less money for travel and keep healthcare staff on site to see patients the same day they attend a continuing education session or on the travel days that would have otherwise occurred. KBTN expects a cost savings of over 10,000 per circuit to participate in the network now. Costs savings now will benefit the development of a long term business plan to maintain the network.

Project Sustainability Period

The KBTN will require continuous upgrades of equipment to maintain pace with tele-technology advances, but the connections and initial investment of space/location and hookups will be one-time expenses. Careful planning and design have engineers projecting that long term, ten years availability of the equipment and telecommunications circuits is not unreasonable expectations. While, the ten years sustainability plan is purely speculative, in these turbulent health care reform times, even 5 years of productive use would net a system improvement that would create improved medical care access and lower health costs. The health care system and customer will find value in these services, so the ten year sustainability period is achievable and our aim.

KBTN 10 Year Budget					
Years	RHCPP/RP Expenses	Rural Health Care Regular Program	Partner Expenses including billing costs	Total Expenses	Patient Revenue
1-3	\$2,856,101	0	563,000	\$3,419,101	\$836,000
3-6	0	1,350,000	1,350,000	\$2,700,000	\$1,400,000
7-10	0	1,350,000	1,350,000	\$2,700,000	\$2,000,000
Total	\$2,856,101	2,700,000	3,263,000	\$5,400,000	\$4,236,000

Principal Factors

The principal factors of the ten year sustainability plan are the billability of Telehealth services, continued implementation of the Affordable Care Act, US government maintenance of Medicare and Medicaid health care supports, and integration of behavioral health and physical health services using the Accountable Care Organization models. While all of these factors are beyond the control of the KBTN, strategically responding to these external events predicates new service delivery systems including Telehealth.

KBTN will make it possible for all member partners to be more cost effective to meet the demands of the changing health care marketplace.

Terms of Membership in the Network

The terms of membership in the KBTN are month to month intervals predicated on bids from telecommunications providers that are reasonable and cost effective in a changing health care marketplace. If the ground rules change each health care provider will independently determine if they wish to continue the network services.

Excess Capacity

The KBTN does not plan to purchase excess capacity.

Ownership Structure

Each KBTN partner will purchase their own end user equipment including any local switches not covered by the RHCPP. Ownership will fall to the local site and not any of the other partners. As lead agency for the KBTN, Kentucky River Community care signs contracts and conducts business on behalf of the network and appoints the Project Coordinator.

Sources of Future Support

Each of the partners agrees to making the network successful and implementing the KBTN goals over the next ten years. The narrative above outlines our sources of future support which includes generating revenue from patient services sufficient to break even with the additional support of the Rural Health Care Regular Program.

Management of the Network

The lead agency in the KBTN, Kentucky River Community Care, Inc. assumes responsibility for the management of the network as we have for the past four years. Once the network is operational, if there are additional management costs the KBTN partners will discuss and arrive at a mechanism for appropriating funds and administering the program. The KBTN partners frequently co-manage projects and have a history of being able to resolve management issues. There will be on-going administrative expenses for the next decades just to be able to submit invoices to USAC and to comply with other programmatic requirements of the Pilot Program. KBTN will have these expenses prorated and submitted as part of each member's monthly invoice.

10. Provide detail on how the supported network has advanced telemedicine benefits:

The network continues to work toward full implementation. Most recently, Kentucky River Community Care, Inc. has initiated telepsychiatry services from offsite providers for their service region. This allows for licensed practitioners from outside their service region to provide needed psychiatry care to clients within their rural communities.

a. Explain how the supported network has achieved the goals and objectives outlined in selected participant's Pilot Program application;

b. Explain how the supported network has brought the benefits of innovative Telehealth and, in particular, telemedicine services to those areas of the country where the need for those benefits is most acute;

c. Explain how the supported network has allowed patients access to critically needed medical specialists in a variety of practices without leaving their homes or communities;

d. Explain how the supported network has allowed health care providers access to government research institutions, and/or academic, public, and private health care

institutions that are repositories of medical expertise and information;

e. Explain how the supported network has allowed health care professional to monitor critically ill patients at multiple locations around the clock, provide access to advanced applications in continuing education and research, and/or enhanced the health care community's ability to provide a rapid and coordinated response in the event of a national crisis

11. Provide detail on how the supported network has complied with HHS health IT initiatives:

The network has not yet complied with any HHS health IT initiatives.

a. Explain how the supported network has used health IT systems and products that meet interoperability standards recognized by the HHS Secretary;

b. Explain how the supported network has used health IT products certified by the Certification Commission for Healthcare Information Technology;

c. Explain how the supported network has supported the Nationwide Health Information Network (NHIN) architecture by coordinating activities with organizations performing NHIN trial implementations;

d. Explain how the supported network has used resources available at HHS's Agency for Healthcare Research and Quality (AHRQ) National Resource Center for Health Information Technology;

e. Explain how the selected participant has educated themselves concerning the Pandemic and All Hazards Preparedness Act and coordinated with the HHS Assistant Secretary for Public Response as a resource for Telehealth inventory and for the implementation of other preparedness and response initiatives; and

f. Explain how the supported network has used resources available through HHS's Centers for Disease Control and Prevention (CDC) Public Health Information Network (PHIN) to facilitate interoperability with public health and emergency organizations

12. Explain how the selected participants coordinated in the use of their health care networks with the Department of Health and Human Services (HHS) and, in particular, with its Centers for Disease Control and Prevention (CDC) in instances of national, regional, or local public health emergencies (e.g., pandemics, bioterrorism). In such instances, where feasible, explain how selected participants provided access to their supported networks to HHS, including CDC, and other public health officials.

While the selected participants have not yet coordinated their health care networks with HHS or the CDC, part of the protocols that will need to be developed will focus upon coordination of health care information with those federal and state agencies involved with public health emergencies and responses to terrorism. The Kentucky Health Information Exchange will also

need to develop these sorts of protocols so that the public impact of pandemics and terrorist acts can be minimized.